

02-12-01

A/RE

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PTO/SB/50 (8-88)

Approved for use through 12/30/2000 OMB 0651-0033

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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REISSUE PATENT APPLICATION TRANSMITTAL

Address to:

Assistant Commissioner for Patents
Box Reissue
Washington, DC 20231

Attorney Docket No.	055123.P086R
First Named Inventor	Schaffer
Original Patent Number	5,870,296
Original Patent Issue Date (Month/Day/Year)	02/09/99
Express Mail Label No.	EL466330343US

APPLICATION FOR REISSUE OF:

(Check applicable box)



Utility Patent



Design Patent



Plant Patent

APPLICATION ELEMENTS (37 CFR 1.173)

- ☒ Fee Transmittal Form (PTO/SB/56)
(Submit an original, and a duplicate for fee processing)
- ☐ Applicant claims small entity status. See 37 CFR 1.27.
- ☒ Specification and Claims in double column copy of patent format (amended, if appropriate)
- ☒ Drawing(s) (proposed amendments, if appropriate)
- ☒ Reissue Oath/Declaration (original or copy)
(37 C.F.R. § 1.175) (PTO/SB/51 or 52)
- Original U.S. Patent currently assigned?
☐ Yes ☒ No
(If Yes, check applicable box(es))
☐ Written Consent of all Assignees (PTO/SB/53)
☒ 37 C.F.R. § 3.73(b) Statement ☐ Power of Attorney
(PTO/SB/96)

ACCOMPANYING APPLICATION PARTS

- ☒ Statement of status/support for all changes to the claims. See 37 CFR 1.173 (c).
- ☒ Original U.S. Patent for surrender
☐ Ribboned Original Patent Grant
☐ Statement of Loss (PTO/SB/55)
- ☐ Foreign Priority Claim (35 U.S.C. 119)
(if applicable)
- ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
- ☐ English Translation of Reissue Oath/Declaration
(if applicable)
- ☒ Preliminary Amendment
- ☐ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
- Other:

15. CORRESPONDENCE ADDRESS



Customer Number or Bar Code Label



Correspondence address below

(Insert Customer No. or Attach bar code label here)

Name	Roger W. Blakely, Jr.				
	BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN, LLP				
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NAME (Print/Type)	Roger W. Blakely, Jr.	Registration No. (Attorney/Agent)	25,831
Signature		Date	02/08/01

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Reissue, Washington, DC 20231.

(Reissue Patent Application Transmittal (PTO/SB/50) [17-1.1]—page 1 of 1)

PTO/SB/56 (08-00)

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REISSUE APPLICATION FEE TRANSMITTAL FORM						Docket Number (Optional) 055123.P086R		
Claims as Filed - Part 1								
Claims in Patent	Number Filed in Reissue Application	(3) Number Extra	Small Entity		Other than a Small Entity			
			Rate	Fee	Rate	Fee		
(A) 21	Total Claims (37 CFR 1.16(j))	(B) 46	**** 25 =	x \$ _____ =	or	x \$ 18 =	450.00	
(C) 2	Independent claims (37 CFR 1.16(i))	(D) 6	* 4 =	x \$ _____ =		x \$ 80 =	320.00	
Basic Fee (37 CFR 1.16(h))				\$ 710		\$ 710.00		
Total Filing Fee				\$ 710	OR	\$ 1,480.00		
Claims as Amended - Part 2								
Total Claims (37 CFR 1.16(j))	(1) Claims Remaining After Amendment	MINUS	(2) Highest Number Previously Paid For	(3) Extra Claims Present	Small Entity		Other than a Small Entity	
					Rate	Fee	Rate	Fee
***	***	MINUS	**	* =	x \$ _____ =		x \$ _____ =	
Independent Claims (37 CFR 1.16(i))	***	MINUS	*****	=	x \$ _____ =		x \$ _____ =	
Total Additional Fee					\$	OR	\$	

* If the entry in (D) is less than the entry in (C), Write "0" in column 3.

** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.

*** After any cancellation of claims.

**** If "A" is greater than 20, use (B - A); if "A" is 20 or less, use (B - 20).

***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).

☐ Applicant claims small entity status. See 37 CFR 1.27.

☐ Please charge Deposit Account No. _____ in the amount of _____
A duplicate copy of this sheet is enclosed.

☒ The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. 02-2666.
A duplicate copy of this sheet is enclosed.

☒ A check in the amount of \$ 1,480.00 to cover the filing / additional fee is enclosed

☐ Payment by credit card. Form PTO-2038 is attached.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

02/08/01
Date

Roger W. Blakely, Jr.
Signature of Applicant, Attorney or Agent of Record

Roger W. Blakely, Jr.
Typed or printed name

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PTO/SB/54 (1-97)

Patent and Trademark Office U.S. DEPARTMENT OF COMMERCE

Under the Payment Reduction Act of 1998, no fee is required to be paid for a submission of information unless it discloses a valid claim number.

REISSUE APPLICATION BY THE ASSIGNEE, OFFER TO SURRENDER PATENT		Docket Number (Optional) 055123.P086R
This is part of the application for a reissue patent based on the original patent identified below.		
Name of Patentee(s): Gregory L. Schaffer		
Patent Number 5,870,296	Date Patent Issued February 9, 1999	
Title of Invention Dual Interleaved DC to DC Switching Circuits Realized in an Integrated Circuit		
Maxim Integrated Products is the assignee of the entire interest in the original patent. I offer to surrender the original patent. <input checked="" type="checkbox"/> A certificate under 37 CFR 3.73(b) is attached. I am authorized to act on behalf of the assignee.		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application, any patent issued thereon, or any patent to which this declaration is directed.		
Name of assignee Maxim Integrated Products, Inc.		
Signature of person signing for assignee <i>Piروز Parvarandeh</i>	Date 2/8/01	
Typed or printed name and title of person signing for assignee Piروز Parvarandeh, Vice President		

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

(Reissue Application by the Assignee — Offer to Surrender Patent (PTO/SB/54) (17-2.1)—page 1 of 1)

PTO/SP-06 (8-00)

Approved for use through 02/02/2000. OMB 0861-0031

Patent and Trademark Office U.S. DEPARTMENT OF COMMERCE

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STATEMENT UNDER 37 CFR 3.73(b)

Docket No. 3927P006Z

Applicant/Patent Owner: Maxim Integrated Products, Inc.Application No./Patent No.: 5,870,296Filing/Issue Date: 02/09/99Entitled: Dual Interleaved DC to DC Switching Circuits Realized in an Integrated CircuitMaxim Integrated Products, a Corporation

(Name of Assignee)

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title and interest; or
2. ☐ an assignee of an undivided part interest

in the patent application/patent identified above by virtue of either:

- A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the Patent and Trademark Office at Reel, Frame, or for which a copy thereof is attached. Reel 8784 / Frame 0659

OR

- B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: _____ To: _____
The document was recorded in the Patent and Trademark Office at
Reel _____, Frame _____, or for which a copy thereof is attached.
2. From: _____ To: _____
The document was recorded in the Patent and Trademark Office at
Reel _____, Frame _____, or for which a copy thereof is attached.
3. From: _____ To: _____
The document was recorded in the Patent and Trademark Office at
Reel _____, Frame _____, or for which a copy thereof is attached.

☐ Additional documents in the chain of title are listed on a supplemental sheet.☐ Copies of assignments or other documents in the chain of title are attached.

NOTE: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the PTO. See MPEP 302-302.8]

The undersigned (whose title is supplied below) is empowered to sign this statement on behalf of assignee.

2/8/01

Date

Signature

Pirooz Farvarandeh

Typed or printed name

Vice President

Title

Burdick-Hall Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assignment Commissioner for Patents, Washington, DC 20231.